



**Juneau Police Department**  
 6255 Alaway Avenue ♦ Juneau, AK 99801  
 (907) 586-0600 Fax (907) 463-4808

## Request for Letter of Local Person Contacts

**REQUESTOR** Please identify yourself and tell us how to notify you regarding this request. *PLEASE PRINT*

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

We will notify you when the document is ready for inspection or pickup:  
 Usually within 3-5 business days.

Please provide us with the information below so that we can more easily complete your request.

Full Legal Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Divers License Number \_\_\_\_\_

Social Security Number \_\_\_\_\_

Does this need to be notarized ?  Yes  No (additional charges apply for notary)

**ADMINISTRATION** *For staff use only.*

Request received by: \_\_\_\_\_ Date: \_\_\_\_\_

Requestor notified: \_\_\_\_\_

Documents released: \_\_\_\_\_

Fee: \_\_\_\_\_

Request referred to: \_\_\_\_\_

Request denied by: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for denial: \_\_\_\_\_